

SAMPLE LETTER FOR A GENERAL RATE INCREASE

Date

Ithan Yanofsky, Deputy Bureau Chief
CON and Rates Section
Bureau of Emergency Medical Services
Arizona Department of Health Services
150 North 18th Avenue, Suite 540
Phoenix, Arizona 85007-3248

Dear Mr. Yanofsky:

Place Name Here Ambulance Service requests an adjustment in general public rates according to Arizona Revised Statute ("A.R.S.") § 36-2234.

Our ambulance service has not applied for an adjustment in general public rates within 6 months. We are requesting a rate increase for the following reasons:

.....

Proposed New Rates

We ask for the following new rates:

\$ _____	ALS amount	\$ _____	Standby / Waiting amount
\$ _____	BLS amount	\$ _____	Subscription Service amount
\$ _____	Mileage amount		

Proposed Disposable Medical Supplies Charges

Our ambulance service: (please identify the correct statement)

will not charge for disposable medical supplies (the cost of supplies is included in proposed new rates).

or

will charge for disposable medical supplies (the cost of supplies is excluded from proposed new rates).

We attest that the information we have provided is correct. We ask that our proposed new rates be effective the date the Decision and Order is signed.

Sincerely,

Jane/John Doe, Title (Fire Chief / EMS Director / Chief Executive Officer / Chief Financial Officer)

Place name Here Ambulance Service

Enclosures:

1. Ambulance Revenue and Cost Reports (ARCR)
 - a. Actual ARCR; for most recent Fiscal Year End
 - b. Projected ARCR; identifying new revenues, expenditures and a cash-flow statement
2. Most recent financial statements (annual financial report)
3. List of ground ambulance service purchase/lease agreements; dollar amounts exceeding \$5,000
4. Identification of any parent company or subsidiary
5. Copy of ground ambulance contracts with federal or tribal entities